DEPT: DEPARTMENT OF HEALTH AND HUMAN SERVICES -

BEHAVIORAL HEALTH DIVISION

UNIT NO. 6300

FUND: General - 0077

OPERATING AUTHORITY & PURPOSE

Pursuant to Sections 46.03(1), 46.21, 51.08, 51.35, 51.42 and 51.437 of the Wisconsin Statutes, the Milwaukee County Department of Health and Human Services-Behavioral Health Division provides care and treatment of persons with disorders related substance alcohol and abuse developmentally, emotionally and mentally ill adults, children and adolescents through contracts with community agencies, outpatient care, day treatment services and inpatient care. Services include intensive short-term treatment, as well as extended care of persons with serious mental illness. Acute hospital admissions are initiated by voluntary application or through legal detention methods such as court commitment. The Adult and Child Inpatient require Title-XIX certification appropriate State licensing to capture Title-XIX and other third-party reimbursement. The extended care

portions of this agency require Federal certification as a Skilled Nursing Facility and Facility for the Developmentally Disabled, allowing for State reimbursement. Day treatment is offered to patients who have progressed to the stage where inpatient hospitalization is no longer indicated, but who require more intensive treatment than is available in an outpatient facility. The Community Services Branch provides both mental health and AODA services through contracts with community service providers or at community clinics. Programs are managed by the Behavioral Health Division Administrator under the jurisdiction of the Director of the Department of Health and Human Services, the Combined Community Services Board, the County Executive and the Milwaukee County Board of Supervisors.

BUDGET SUMMARY									
Account Summary	2006 Actual		2007 Budget		2008 Budget		2007/2008		
								Change	
Personal Services (w/o EFB)	\$	44,921,839	\$	43,495,918	\$	46,749,011	\$	3,253,093	
Employee Fringe Benefits (EFB)		28,266,272		31,969,136		29,662,735		(2,306,401)	
Services		8,967,060		8,457,728		9,157,622		699,894	
Commodities		7,706,666		6,774,456		7,461,072		686,616	
Other Charges		75,752,660		76,133,427		71,676,569		(4,456,858)	
Debt & Depreciation		1,609,110		0		0		0	
Capital Outlay		138,318		163,295		237,500		74,205	
Capital Contra		(252,116)		0		0		0	
County Service Charges		36,945,113		37,634,451		39,292,726		1,658,275	
Abatements	_	(32,989,608)		(34,565,349)	_	(33,069,579)	_	1,495,770	
Total Expenditures	\$	171,065,314	\$	170,063,062	\$	171,167,656	\$	1,104,594	
Direct Revenue		52,517,903		65,616,704		55,704,025		(9,912,679)	
State & Federal Revenue		69,134,968		65,332,359		60,681,757		(4,650,602)	
Indirect Revenue		10,356,269		343,750		10,201,323		9,857,573	
Total Revenue	\$	132,009,140	\$	131,292,813	\$	126,587,105	\$	(4,705,708)	
Direct Total Tax Levy		39,056,174		38,770,249		44,580,551		5,810,302	

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ADDITIONAL COSTS NOT INCLUDED IN TAX LEVY*										
Account Summary	2006 Actual		2007 Budget		2008 Budget			2007/2008 Change		
Central Service Allocation	\$	1,410,748	\$	1,390,167	\$	0	\$	(1,390,167)		
Courthouse Space Rental		0		0		0		0		
Tech Support & Infrastructure		577,859		785,985		0		(785,985)		
Distribution Services		5,919		6,954		0		(6,954)		
Telecommunications		134,554		127,895		0		(127,895)		
Record Center		9,326		6,089		0		(6,089)		
Radio		15,153		13,860		0		(13,860)		
Computer Charges		115,156		124,915		0		(124,915)		
Applications Charges		541,800		597,823		0		(597,823)		
Apps Charges - Network		0		0		0		Ó		
Apps Charges - Mainframe		0		0		0		0		
HRIS Allocation		307,192		262,276		0		(262,276)		
Total Charges	\$	3,117,707	\$	3,315,964	\$	0	\$	(3,315,964)		
Direct Property Tax Levy	\$	39,056,174	\$	38,770,249	\$	44,580,551	\$	5,810,302		
Total Property Tax Levy	\$	42,173,881	\$	42,086,213	\$	44,580,551	\$	2,494,338		

^{**} In 2006 and 2007, these costs were included in other charging departmental and non-departmental budgets. They were reflected here to show the "total" amount of tax levy support for this Department. In 2008, these costs are budgeted within the receiving department to show the tax levy cost in the department.

PERSONNEL SUMMARY									
	2006 Actual		2007 Budget		2008 Budget			2007/2008 Change	
Personal Services (w/o EFB) Employee Fringe Benefits (EFB)	\$ \$	44,921,839 28,266,272	\$ \$	43,495,918 31,969,136		46,749,011 29,662,735	\$	3,253,093 (2,306,401)	
Position Equivalent (Funded)*		877.3	•	886.8	Ť	890.9	Ť	4.1	
% of Gross Wages Funded		97.1		94.7		93.2		(1.6)	
Overtime (Dollars)**	\$	4,021,861	\$	2,398,704	\$	2,776,793	\$	378,089	
Overtime (Equivalent to Position)		90.8		53.9		51.4		(2.5)	

^{*} For 2006 Actuals, the Position Equivalent is the budgeted amount.

^{**} Delineated for information. (Also included in personal services.)

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PERSONNEL CHANGES										
		Number of		Cost of Positions						
		Positions/		(Excluding Social						
Job Title/Classification	Action	Total FTE	Division	Security & Fringe)						
Clinical Nurse Specialist	Abolish	1/1.0	Acute Adult	\$ (61,213)						
Clinic Safety/Risk Mgmt Nurse	Abolish	1/1.0	Acute Adult	(65,203)						
Research Coordinator	Abolish	1/1.0	Administration	(50,128)						
Clerical Assistant 2	Abolish	1/1.0	AODA - ATR	(36,550)						
Quality Assurance Coordinator	Abolish	1/1.0	AODA - ATR	(54,964)						
Quality Assurance Specialist	Unfund	1/1.0	AODA - ATR	(42,887)						
Admin Coordinator (BH)	Abolish	1/1.0	AODA - TANF	(58,313)						
Integrated Service Coordinator	Unfund	1/1.0	AODA - SAIL	(77,170)						
Nursing Assistant MH Pool	Create	7/7.0	Acute Adult	299,999						
Office Support Assistant 2	Abolish	1/1.0	Wraparound	(33,134)						
Staff Psychiatrist	Create	1/1.0	Psychiatric Crisis	163,081						
Unit Clerk	Create	1/1.0	Psychiatric Crisis	31,289						
Registered Nurse 1	Create	4/4.0	Psychiatric Crisis	230,292						
Nurse Practicioner	Create	1/0.5	Psychiatric Crisis	36,562						
Human Service Worker	Create	3/2.6	Psychiatric Crisis	127,668						
Clinical Psych 3	Create	1/1.0	Psychiatric Crisis	73,111						
OCC Therapist 2	Create	1/1.0	Psychiatric Crisis	51,781						
Housing Program Manager (BHD)	Transfer-Out	1/1.0	Special Needs Housing	(66,889)						
Housing & ComDev CD Spec ND	Transfer-Out	1/1.0	Special Needs Housing	(63,039)						
Asst Housing Prog Coord SN	Transfer-Out	1/1.0	Special Needs Housing	(55,530)						
Housing Program Assistant SN	Transfer-Out	4/4.0	Special Needs Housing	(186,924)						
Secretary	Transfer-Out	1/1.0	Special Needs Housing	(39,456)						
Clerical Assistant 1	Abolish	1/1.0	Wraparound	(34,212)						
Case Assesment Specialist CATC	Abolish	2/2.0	Wraparound	(88,278)						
			TOTAL	\$ (107)						

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ORGANIZATIONAL COST SUMMARY									
DIVISION	N 2006 Actual		2007 Budget		2008 Budget		2007/2008		
								Change	
Management /	Expenditure	\$	33,272,693	\$	34,246,311	\$	34,696,038	\$	449,727
Support Services	Abatement		(32,139,391)		(33,481,700)		(33,068,791)		412,909
	Revenue		674,148		903,738		964,100		60,362
	Tax Levy	\$	459,154	\$	(139,127)	\$	663,147	\$	802,274
Inpatient Services:	Expenditure	\$	24,850,701	\$	25,345,458	\$	25,637,082	\$	291,624
Nursing Facility	Abatement		(136,047)		(118,550)		0		118,550
Services	Revenue		9,315,633		9,246,918		9,270,013	_	23,095
	Tax Levy	\$	15,399,021	\$	15,979,990	\$	16,367,069	\$	387,079
Inpatient Services:	Expenditure	\$	34,461,502	\$	32,540,215	\$	34,208,208	\$	1,667,993
Acute Adult / Child	Abatement		(86,558)		(90,308)		0		90,308
Services	Revenue		17,743,496		15,600,000		15,600,000		0
	Tax Levy	\$	16,631,448	\$	16,849,907	\$	18,608,208	\$	1,758,301
Adult Community	Expenditure	\$	33,641,016	\$	36,205,752	\$	31,907,544	\$	(4,298,208)
Services	Abatement		(350,179)		(458,054)		0		458,054
	Revenue		33,277,084		36,648,559		32,436,664		(4,211,895)
	Tax Levy	\$	13,753	\$	(900,861)	\$	(529,120)	\$	371,741
Child and	Expenditure	\$	37,942,850	\$	42,044,288	\$	42,799,009	\$	754,721
Adolescent	Abatement		(89,365)		(154,475)		0		154,475
Services	Revenue		39,096,749		41,984,961		42,777,336		792,375
	Tax Levy	\$	(1,243,264)	\$	(95,148)	\$	21,673	\$	116,821
Adult Crisis	Expenditure	\$	13,273,692	\$	13,153,152	\$	16,217,155	\$	3,064,003
Services	Abatement		(112,080)		(126,026)		(788)		125,238
	Revenue		8,026,591		7,433,822		8,553,022	_	1,119,200
	Tax Levy	\$	5,135,021	\$	5,593,304	\$	7,663,345	\$	2,070,041
AODA Services	Expenditure	\$	26,612,580	\$	21,093,235	\$	18,772,199	\$	(2,321,036)
	Abatement		(76,011)		(136,236)		0		136,236
	Revenue		23,875,450		19,474,815		16,985,970		(2,488,845)

^{*} Due to account realignments among the program areas within BHD, Tax Levy increases in 2006 in non-management areas due to internal cost allocations being included in the budgeting software system for the first time in 2006. This continues in 2007.

2,661,119 | \$

1,482,184

MISSION

Tax Levy

The mission of the Milwaukee County Behavioral Health Division is for the empowerment and recovery of all people with behavioral health needs in our community.

OBJECTIVES

Please see Org. Unit 8000 – Department of Health and Human Services (DHHS) for a Department-wide listing of objectives.

VISION

The Milwaukee County Behavioral Health Division will be a premier system of mental health and AODA

services in the State of Wisconsin. It will ensure that individuals and families who have mental health needs or alcohol or substance abuse disorders strive to function at optimal levels of physical and behavioral health and that they are full and equal members of the community. As such, the Division shall provide individuals who have behavioral health needs the support and means to pursue success in the ways they choose to live, learn, love, work and play because:

1,786,229

 Our vision is for a behavioral health system that recognizes the partnership with consumers, providers and the community and the accountability to stakeholders for the effective development and efficient use of resources.

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 Our vision is for a recovery oriented behavioral health system that focuses on the rebuilding of full productive lives for children, adults and their families, and supports a full spectrum of services including primary prevention and early intervention.

- Our vision is for a behavioral health system that attracts, retains and supports employees/other service providers who are competent and provide excellent quality and culturally and linguistically relevant behavioral health treatment and support services.
- Our vision is for a behavioral health system that acknowledges the abundance and limitations of our human and financial resources and commits to responsible stewardship of its resources.
- Our vision is for consumers and families to be equal stakeholders in service system governance, planning and delivery.
- Our vision is for a behavioral health system where every consumer has access to strengthsbased, individualized and integrated services that promote health and recovery.
- Our vision is for a behavioral health system where cultural, ethnic and socioeconomic diversity is valued by providers and consumers.
- Our vision is for a behavioral health system where strategies to eradicate stigma, including education of consumers, family members, providers and the Milwaukee County community, are implemented and effective.
- Our vision is for behavioral health services and supports to be community based and not institution based; when residential treatment or hospitalization is accessed, those services will be used as resources and not as placements.
- Our vision is for a behavioral health system that can measure its success in the care of children and adults by establishing and producing clear, quantifiable outcomes.

The Department of Health and Human Services – Behavioral Health Division (BHD) budget is

presented in a programmatic format based on seven major programs or service areas:

- a. Management/Support Services
- b. Inpatient Services
 - Nursing Facility Services
 - Acute Adult /Child Services
- c. Adult Community Services
- d. Child and Adolescent Community Services
- e. Adult Crisis Services
- f. AODA Services

Under this format, program costs consist of both direct expenditures and allocated costs that are attributable to the operation of the program. All costs not directly offset by revenue in the Management/Support Sections are distributed to the other six program areas. The allocated or indirect costs are distributed to the program areas using a step-down methodology that operates under Medicare Cost Reporting principles. Those principles involve the use of statistical parameters that represent measures to allocate costs based on resources consumed by a program. For example, the number of patients served, space, number of staff, etc., are parameters.

Revenues for each program consist of both charges directly associated with the provision of services to patients and other operating revenues that are not directly related to patient services.

BUDGET OVERVIEW

- Personal Services expenditures, excluding fringe benefits, increase \$3,253,093, from \$43,495,918 to \$46,749,011.
- Total expenditures increase \$1,104,594, from \$170,063,062 to \$171,167,656, due in part to increased overhead costs including food and utilities. Total revenues decrease \$4,705,708, from \$131,292,813 to \$126,587,105, due primarily to the removal of revenues associated with the Abri Health program.
- BHD continues and will put increased focus on its practice of encouraging current clients eligible for Family Care benefits to enroll in that program. For clients who are receiving residential or other purchased services in the community, this results in the transfer of the

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contractual relationship from BHD to the Family Care program. It is projected that these efforts will allow BHD to reduce its related Purchase of Service expenditures by \$450,000 in 2008.

- The 2008 Budget contains a series of new housing initiatives for persons with mental illness that build off of the package of housing initiatives that was included in the 2007 Budget. Details on these initiatives are contained in the Department of Health and Human Services budget and the Capital Improvements Budget.
- BHD, via the State of Wisconsin, successfully applied for and received a three-year Access to Recovery (ATR) grant totaling approximately \$22 million in late 2004, which has provided approximately \$7 million in grant revenue during each of the past three years. Nationwide funding for ATR recently has diminished, and BHD's ATR grant is expected to be reduced to approximately \$4.8 million for 2008.
- Due to this significant reduction in Access to Recovery funding, an additional \$600,000 in tax levy funding is allocated for maintenance of effort for AODA prevention and intervention services in 2008.
- The 2008 Budget includes \$1,035,566 in property tax levy and \$766,500 in reimbursement revenue for a series of initiatives designed to address the significant surge in volume at BHD's Psychiatric Crisis Service and increased safety concerns caused largely by the increased volume and increased acuity of patients being served at the Mental Health Complex.
- BHD will work with DAS Human Resources as part of their Recruitment and Family and Medical Leave Act initiatives, as well as pursue internal strategies to reduce departmental use of overtime whenever possible.
- In July 2007, the County Board authorized BHD and DAS Economic and Community Development to begin negotiations for the possible purchase or long-term lease of the St. Michael Hospital facility in order to determine the feasibility and desirability of moving BHD operations from the County Grounds to that

facility. BHD and DAS will continue to work on this issue in 2008.

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- Departments have the authority to fill unfunded positions provided they do not incur a salary deficit.
- ECP positions are not provided step increases or performance awards in 2008 as allowed in County Ordinance Section 17.265 (3).
- The abatement of Countywide crosscharges is discontinued in 2008. The tax levy previously held in the servicing department is redistributed to the recipient departments in an amount corresponding to the crosscharges. This results in a tax levy redistribution equal to the change in abatements. Due primarily to this change in methodology, direct tax levy for this department increased \$5,810,302. The actual change in tax levy for this department from 2007 is an increase of \$2,494,338.
- All departments are required to operate within their expenditure appropriations and their overall Budgets. Pursuant to Section 59.60(12), Wisconsin Statutes, "No payment may be authorized or made and no obligation incurred against the county unless the county has sufficient appropriations for payment. payment may be made or obligation incurred against an appropriation unless the director first certifies that a sufficient unencumbered balance is or will be available in the appropriation to make the payment or to meet the obligation when it becomes due and payable. obligation incurred and an authorization of payment in violation of this subsection is void. A county officer who knowingly violates this subsection is jointly and severely liable to the county for the full amount paid. A county emplovee who knowingly violates this subsection may be removed for cause."

INPATIENT SERVICES/ NURSING FACILITY SERVICES

Program Description

The Nursing Home Facilities are licensed Rehabilitation Centers that provide long-term, non-

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acute care to patients who have a serious mental illness.

The Rehabilitation Center-Central is a 70-bed, Title XIX certified, skilled-care licensed nursing home. The facility consists of three units, which serve geriatric, as well as young, physically aggressive persons with serious mental illness. The primary source of admission to the program is the Behavioral Health Division Acute Adult Hospital. The facility is one of the few long-term care settings in Southeastern Wisconsin that provides locked-unit settings for extremely aggressive persons with serious mental illness.

The Rehabilitation Center-Hilltop is a 72-bed Title XIX certified facility licensed as a Facility for the Developmentally Disabled (FDD). The facility provides programs and an environment specially designed for residents with a primary diagnosis of developmental disability and secondary psychiatric diagnoses. The majority of the facility's residents are referred from the Behavioral Health Division Acute Adult Hospital.

BUDGET HIGHLIGHTS

 The 2008 budget anticipates no major changes in the Nursing Facilities Services programs. However, BHD and the Disabilities Services Division will assign the highest priority to planning for the discharge of long-term cognitively disabled patients from the Nursing Facilities and acute inpatient hospital to more appropriate community-based care settings.

INPATIENT SERVICES ACUTE ADULT / CHILD SERVICES

Program Description

Hospital inpatient services are provided in five 24bed units. Four units include specialized programs in geropsychiatry and acute adult. One unit includes specialized programs for children & adolescents.

The acute adult units provide inpatient care to individuals over age 18 who require secure short-term or occasionally extended hospitalization. Psychiatry, psychology, nursing, social service and rehabilitation therapy provide assessment and

treatment designed to return the patient to his or her own community as rapidly as possible.

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The child and adolescent units provide inpatient care to individuals age 18 and under who require secure short term or occasionally extended hospitalization. While utilization of child and adolescent inpatient services has declined with the emphasis on community-based care through the Wraparound Program, there is still a significant need for short-term assessment and treatment provided by the inpatient services. Child and adolescent units continue to provide all emergency detention services for Milwaukee County as well as inpatient screening for Children's Court.

- Pharmaceutical service expenditures increase \$400,000, from \$2,800,000 to \$3,200,000, based on the continued increasing cost of medications. The total BHD pharmaceutical budget is \$4,120,000.
- In 2008, BHD will work with other County departments to determine the efficacy of developing a County-wide formulary plan or a coordinated pharmaceutical purchasing strategy with the intent of capturing economies of scale. Consideration will be given to partnering with other governmental entities or existing drug consortia if feasible and advantageous.
- One (1.0 FTE) vacant position of Clinical Nurse Specialist is abolished for a salary, social security and active fringe savings of \$96,095.

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ADULT COMMUNITY SERVICES

Program Description

Adult Community Services is composed of community-based services for persons having a serious and persistent mental illness and for persons having substance abuse problems or a substance dependency. The majority of services in the mental health program area are provided through contracts with community agencies. However, the Behavioral Health Division (BHD) also directly operates several community-based mental health programs. Access to all long-term community-based mental health services is managed centrally by the Service Access to Independent Living unit (SAIL). Access to all community-based substance abuse treatment services is managed by several independently contracted central intake units.

The mental health program area is composed of several major program areas for the medical and non-medical care of consumers in the community. These program areas are Community Support Programs, Community Residential, Targeted Case Management, Outpatient Treatment and Prevention and Intervention services. The services provided in these program areas include both those directly provided by Milwaukee County and those purchased from community agencies. Services are designed to provide for a single mental health delivery system that reduces institutional utilization and promotes consumer independence and recovery. Community Services area is dedicated to providing all services in the least restrictive and most therapeutically appropriate cost-effective setting.

BUDGET HIGHLIGHTS

• The Adult Community Service Mental Health Purchase of Service budget is reduced by \$450,000. This reduction will have minimal impact on BHD community-based services, as it is projected that the reduction will be offset via the conversion of eligible clients who receive residential, Community Support Program and Targeted Case Management purchased services to the Family Care program. This will reduce BHD's purchase of service budget because the contractual relationship for the services received by these clients will be between the Care Management Organization and the provider. This will not result in a change or reduction of services for these clients.

Housing Section

- The Special Needs Housing section is transferred in 2008 as part of the consolidation of several housing programs from around the County into the newly created Department of Health and Human Services Housing Division. This section consists of two HUD-funded programs: Shelter Plus Care, which links rental subsidies with supportive services for homeless individuals with serious and persistent mental illness; and Safe Haven, which provides a home-like environment to seriously mentally ill homeless individuals. Service expenditures and corresponding revenues are transferred along with the following eight positions:
 - 1.0 FTE Housing Program Manager (BHD)
 - 1.0 FTE Housing & Comm Dev CD Spec ND
 - o 1.0 FTE Asst Hous Prog Coord (SN)
 - 4.0 FTE Housing Program Assistant (SN)
 - 1.0 FTE Secretary
- The Mental Health Housing Initiative, which provides funding for services and capacitybuilding measures focused on providing and enhancing permanent housing for persons with mental illness, is also transferred. The total property tax levy transferred is \$1,051,379.

ADULT CRISIS SERVICES

Program Description

The Adult Crisis Services function is composed of multiple programs that assist individuals in need of immediate mental health intervention to assess their problems and develop mechanisms for stabilization and linkage. The **Psychiatric** Crisis Service/Admission Center (PCS) serves between patients and 13,000 each vear. Approximately 65 percent of the persons receiving services are brought in by police on an Emergency Detention. The rest of the individuals seen are Milwaukee County residents who walk in and receive services on a voluntary basis. In addition to PCS. Adult Crisis Services runs a Mental Health Walk-In Outpatient Clinic, an Observation Unit, the

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Crisis Line, Mobile Crisis Teams, an Alcohol and Drug Abuse Team, a Geriatric Psychiatry Team and two eight-bed Crisis Respite houses. These services are provided by a multi-disciplinary team of mental health professionals.

BUDGET HIGHLIGHTS

- The 2008 Budget includes \$1,035,566 in property tax levy – and \$1,802,066 overall – for a series of initiatives designed to address the significant surge in volume at BHD's Psychiatric Crisis Service and increased safety concerns caused largely by the increased volume and increased acuity of patients being served at the Mental Health Complex. Those initiatives are summarized as follows:
 - An appropriation of \$441,779 is provided to allow BHD to increase its observation (Obs) beds in the Crisis Service from 11 to 18, which will represent a significant expansion of essential treatment capacity for PCS. This action will require the creation of 8.6 FTE's at a salary, social security and active fringe cost of \$856,399, an additional appropriation of \$31,200 for a peer support specialist, and budgets \$320,680 for overtime to ensure 24/7, 365-day coverage. These costs are offset by \$766,500 of reimbursement revenue. The positions to be created are as follows:
 - 4.0 FTE Registered Nurse 1
 - o 2.6 FTE Human Service Workers
 - o 1.0 FTE OCC Therapist 2
 - 1.0 FTE Staff Psychiatrist
 - 1.0 FTE Unit Clerk
 - An appropriation of \$52,056 is provided for 20 hours per week of Nurse Practitioner time for the Crisis Resource Center, which is scheduled to begin operation in October 2007. The Crisis Resource Center is a grant-funded initiative developed by the Mental Health Task Force, community-based providers and BHD that is designed to provide early intervention and sub-acute treatment to individuals who are at risk of, but not in, psychiatric crisis. Every individual who can be kept away from PCS and still receive appropriate treatment enables PCS and BHD's acute inpatient hospital to serve

those who need crisis intervention and hospitalization.

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- An appropriation of \$73,204 is provided to fund a Utilization Review Nurse created per the recommendation of BHD in mid-2007 to work exclusively in PCS to divert patients on emergency detention and voluntary insured patients to private hospitals.
- An appropriation of \$101,258 is provided to create 1.0 FTE Psychologist to help staff the Mobile Crisis Team (MCT) during evening shifts. The psychologist would augment the work of the current MCT by being available 7 days a week working an evening shift concurrent with MCT
- One 1.0 FTE position of Human Service Worker Supervisor is transferred from the Wraparound program to enable seven-day process serving capability, which would reduce court-related dismissals of patients and lead to shorter inpatient hospital stays. This produces an increased appropriation of \$82,696 in crisis services, which is fully offset by a reduction of the same amount in the Wraparound program.
- An additional appropriation of \$224,573 is added to BHD's security budget to sustain increased security staff added in the fall of 2007 in response to increased incidents of patient-to-staff violence.
- An appropriation of \$60,000 is provided to allow all clinical staff in PCS, inpatient and long-term operations to receive Challenging Behavior Training.
- The BHD Administrator is directed to convene a task force including BHD clinical staff, managers, nurses union representatives and community mental health advocates to discuss the pros and cons associated with creation of an intensive management unit within the acute inpatient hospital and/or Rehab Central to address the myriad of issues associated with patients who present difficult and sometimes violent behavior, and to also consider alternative approaches. The BHD Administrator shall

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provide a report to the County Executive and Health and Human Needs Committee by February 1, 2008, with recommendations on this issue.

- In addition to these actions, BHD and the Disabilities Services Division have assigned the highest priority to planning for the discharge of long-term cognitively disabled patients from acute inpatient hospital beds they occupy to more appropriate communitybased care settings.
- It is assumed, based on the extension of the existing agreement between DHHS and the four major hospital system partners through 2008, that the hospital systems again will provide \$500,000 to offset the costs associated with 16 crisis respite beds in the Adult Crisis Services area. The availability of these crisis resources -along with other initiatives undertaken by BHD, including cooperative agreements with Rogers Memorial Hospital and Aurora Psychiatric and ongoing improvements in Hospital, systematic internal review of lengths of stay have allowed BHD to effectively manage censuses on the adult psychiatric inpatient hospital units. This, in turn, has alleviated delays in transferring individuals in psychiatric crisis from local general hospital emergency rooms to the BHD Psychiatric Crisis Service.

ALCOHOL AND OTHER DRUG ABUSE (AODA) SERVICES

Program Description

The Alcohol and Other Drug Abuse (AODA) Services area includes detoxification, residential, day treatment, outpatient clinical treatment services, prevention, intervention, and recovery support services. Services are paid through both purchase of service contracts and a fee-for-service payment mechanism.

In August 2007, the federal "Access to Recovery" (ATR) grant received from the Substance Abuse and Mental Health Services Administration expired. This grant represented approximately 40% of available AODA treatment funds. ATR funds were a major component of the redesigned AODA system, which is now called Wlser Choice. The Wlser Choice

AODA services system provides a range of service access, clinical treatment, recovery support coordination (case management) and recovery support services.

The Behavioral Health Division, through the State of Wisconsin, anticipates receiving a new ATR grant in the annual amount of \$4,803,000. This includes \$483,000 in administrative support, with the remaining funds being available for treatment. The ATR grant is intended to maintain the existing WIser Choice system. The target populations include: 1) the general population, which includes adults seeking assistance in addressing their substance abuse disorder; 2) a population that is involved with the state correctional system, which includes Milwaukee County residents returning to the community from the prison system and individuals on probation or parole and facing revocation; and 3) a population that is involved in the local, Milwaukee County correctional system, i.e., HOC, Jail. Within these three populations are two priority subpopulations: pregnant women and women with children. Revenues derived from the new ATR grant are included in BHD's 2008 budget.

The majority of funds provided to community agencies are through a fee-for-service voucher system. Purchase of service contracts that remain are specifically for detoxification, prevention, intervention and central intake unit services. The AODA provider network continued to expand in 2007, with nearly 170 participating agencies providing a wide variety of clinical, recovery support and recovery support coordination services.

- The total AODA expenditure budget for 2008 is \$18,772,199. This total includes an anticipated ATR grant award of \$4,803,000.
- Federal funding of the Access to Recovery (ATR) grant is reduced by \$2,488,845, from \$7,291,845 to \$4,803,000. A corresponding reduction of purchase of service and professional service contracts is taken in the amount of \$2,166,332. In addition, 1.0 FTE position of Quality Assurance Coordinator (ATR) is abolished for a salary, social security and active fringe savings of \$79,574, 1.0 FTE position of Clerical Assistant 2 is abolished for a

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salary, social security and active fringe savings of \$57,572, and 1.0 FTE position of Quality Assurance Specialist (AODA) is unfunded for a county children with sever behavioral problems who are in more child serving systems and

of \$65,144.

 The budget includes a total of \$302,016 in the purchase of service contracts with the AIDS Resource Center and Fighting Back, Inc. for AODA prevention activities.

salary, social security and active fringe savings

- The budget includes \$100,000 for the 211 Human Services phone line operated by IMPACT Alcohol and Drug Abuse Services, an increase of \$20,000 from 2007. DHHS budgets \$380,000 and the Department on Aging budgets \$20,000 for a total County commitment of \$500,000.
- BHD continues to purchase AODA client services through the Wiser Choice network in 2008. This framework provides increased access, efficiency, capacity and services to individuals to support their recovery from substance abuse.
- An appropriation of \$5,000 is budgeted for the Safe Ride of Milwaukee County program, whose other sponsors include the Tavern League of Wisconsin and Business Against Drunk Driving.

CHILD AND ADOLESCENT COMMUNITY SERVICES

Program Description

The Child and Adolescent Community Services Branch of the Behavioral Health Division functions as a purchaser and manager for the mental health services system for Milwaukee County youth through the Wraparound Milwaukee Program and FISS Services Program. Additionally, it provides mental health crisis intervention services to the Milwaukee Public School System, Child Welfare System and to all Milwaukee County families in need of the services.

The Wraparound Milwaukee Program contracts with the Wisconsin Medicaid Program, the Bureau of Milwaukee Child Welfare and the DHHS Delinquency and Court Services Division to function as the managed care, HMO entity for Milwaukee County children with severe emotional and behavioral problems who are involved with two or more child serving systems and at risk of residential treatment, correctional or psychiatric inpatient placement.

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FUND: General - 0077

The Child and Adolescent Community Services Bureau also operates the FISS Services Program for adolescents who have a history of truancy, parent/child conflicts and runaway behaviors. The program, which is funded by the Bureau of Milwaukee Child Welfare and Medicaid, provides mental health and support services to divert youth from formal court intervention.

Besides providing general crisis intervention to all Milwaukee County families, the Mobile Urgent Treatment Team (MUTT) has separate contracts with the Milwaukee Public Schools to provide six crisis intervention workers for youth whose disruptive behavior and emotional needs threaten their school placement. MUTT also has an agreement with the Bureau of Milwaukee Child Welfare to provide crisis services to foster families to maintain the stability of foster homes and reduce "failed foster" placements.

- The 2008 Budget for Wraparound Milwaukee includes more than \$19.7 million in Medicaid capitation and crisis payments, in addition to the case rate funding from Child Welfare and fixed payments from Juvenile Justice, to serve a projected daily enrollment of 620 children (1,000 annually) in its regular, existing wraparound.
- Wraparound Milwaukee revenues for the Mobile Urgent Treatment Team for the foster care system in 2008 are \$482,179 and for MPS \$426,458.
- Total State Child Welfare and Medicaid funding for the FISS Program is budgeted at \$440,000 to serve approximately 40 families per month in 2008.
- In 2008, the DHHS-Delinquency and Court Services Division and Wraparound Milwaukee will continue to collaborate on the highly

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FUND: General - 0077

ccessful FOCUS program for youth who These include General & Administrative, Fiscal.

successful FOCUS program for youth who would otherwise be committed to Juvenile Corrections. DCSD provides \$1,786,416 in funding for these services.

- The \$4,875,000 in Medicaid revenues and corresponding expenses from an anticipated arrangement under which BHD would provide mental health services to participants in Abri Health Plan, Inc. is removed from the budget due to the State's decision to cancel the Abri contract in 2007.
- Medicaid revenues increase by \$3,788,314 for non-court ordered youth enrolled in the Wraparound Managed Care System. For 2008, Wraparound Milwaukee has received Medicaid approval to increase its enrollment from 600 to 800 Medicaid eligible SED youth. This increase is to target youth from the Milwaukee Public Schools or other agencies with serious emotional needs who are not currently under a Child Welfare or Juvenile Justice court order. All funds to serve these youth will be state or federal Medicaid funds.
- Due to changing program requirements, 1.0 FTE vacant Office Support Assistant 2, 1.0 FTE vacant Clerical Assistant 1, and 2.0 FTE vacant Case Assessment Specialists (CATC) are abolished for a salary, social security and active fringe savings of \$245,629.

MANAGEMENT/SUPPORT SERVICES

Program Description

The Management/Support Services Section includes costs associated with the overall operation of the Behavioral Health Division.

These include General & Administrative, Fiscal. Patient Accounts & Admissions, Management Information Systems, Personnel, Maintenance, Security, Medical Records, Library, Pharmacy, Quality Assurance and Utilization Review, Dietary, Housekeeping, Linen, Stores, Clinical Administration, Medical Officer of the Day and Professional Education. Expenditures are allocated to the Inpatient Services/Nursing Facility, Inpatient Services/Acute Adult/Child, Adult Community, Adult Crisis and Child and Adolescent programs, according to Medicare and Medicaid cost allocation methodologies reflective of services consumed by the programs.

UNIT NO. 6300

- The utilities budget is increased by \$200,000 based on experience.
- One (1.0 FTE) position of Research Coordinator and 1.0 FTE position of Clinical Safety/Risk Mgmt Nurse are abolished for a salary, social security and active fringe savings of \$165,605.
- \$50,000 is budgeted for computer replacements.
 In past years, this cost has been included in IMSD's budget.
- A \$724,128 increase is budgeted in Commodity/Service Account budgets (\$424,574 in security costs, inclusive of the \$224,573 of security associated with the Psychiatric Crisis Service Safety initiative, \$212,827 in food, and \$86,727 in household supplies) based on actual experience.

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UNIT NO. 6300

FUND: General - 0007

EXPENDABLE TRUST ACCOUNTS

The following, for informational purposes, are expendable trust accounts, which may be utilized only for purposes which are legally mandated or where a formal trust relationship exists. The expenditures from these organizational units are limited to the purpose specifically designated by the donor. These trusts are not included as part of the BHD operating budget.

Org. Unit	Description of Exp	endable Trust	Projected Balances as of 12/31/07
0701	BHD - Research Fund		\$360,000
	Referred to as the Frieda Brunn M this fund was created in 1970 for mental health research. Expenditu fund are made by the Research Con	or the purpose of supporting are recommendations from this	
		Revenue 25,000	
0702	BHD – Patient Activities and Specia	al Events	\$157,000
	This fund is comprised of various expenditures should be made to prespecial events.		
	- 	<u>Revenue</u> 10,100	